



Quarantine Station,  
Ministry of Health, Labour and Welfare, Government of Japan

インドネシア語

Indonesian

Surat Keterangan Pemeriksaan COVID-19  
Certificate of Testing for COVID-19

Tanggal penerbitan

Date of issue \_\_\_\_\_

Nama

Name \_\_\_\_\_

Tgl. Lahir

Date of Birth \_\_\_\_\_

Dengan ini diterangkan bahwa telah dilakukan pemeriksaan COVID-19 terhadap orang tersebut di atas, dan berikut ini adalah hasil dari pemeriksaan tersebut.

*This is to certify the following results which have been confirmed by testing for COVID-19 conducted with the sample taken from the above-mentioned person.*

Sampel Sample (Ceklis salah satu kotak di bawah ini/Check one of the boxes below)	Metode tes COVID-19 Testing Method for COVID-19 (Ceklis salah satu kotak di bawah ini/Check one of the boxes below)	Hasil Result	Tanggal & jam pengambilan sampel Specimen Collection Date and Time	Catatan Remarks
<input type="checkbox"/> Swab Nasofaring <i>Nasopharyngeal Swab</i>	<input type="checkbox"/> Tes Amplifikasi Asam Nukleat (Metode NAAT: PCR, LAMP, TMA, TRC, Smart Amp, NEAR, Next generation sequence) <i>Nucleic acid amplification test (NAAT: PCR, LAMP, TMA, TRC, Smart Amp, NEAR, Next generation sequence)</i>	<input type="checkbox"/> Negatif <i>Negative</i>	Date (yyyy/mm/dd)  / /  Time AM/PM : _____	
<input type="checkbox"/> Swab Nasal* <sup>2</sup> <i>Nasal Swab</i>				
<input type="checkbox"/> Air Liur <i>Saliva</i>	<input type="checkbox"/> Tes Antigen Kuantitatif* <sup>1</sup> <i>Quantitative antigen test (CLEIA/ECLIA)</i>	<input type="checkbox"/> Positif <i>Positive</i> → Tolak Masuk Jepang No Entry into Japan		
<input type="checkbox"/> Swab Nasofaring dan Orofaring <i>Nasopharyngeal and oropharyngeal swabs</i>				

\*1 Bukan tes antigen kualitatif.

*Not a qualitative antigen test.*

\*2 Swab Nasal berlaku jika menggunakan metode tes amplifikasi asam nukleat.

*Nasal Swab is valid when the test method is Nucleic acid amplification test.*

Nama Institusi Medis *Name of Medical institution* \_\_\_\_\_



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Sampel Sample (Ceklis salah satu kotak di bawah ini/Check one of the boxes below)	Metode tes COVID-19 Testing Method for COVID-19 (Ceklis salah satu kotak di bawah ini/Check one of the boxes below)	Hasil Result	Tanggal & jam pengambilan sampel Specimen Collection Date and Time	Catatan Remarks
<input checked="" type="checkbox"/> Swab Nasofaring <i>Nasopharyngeal Swab</i>  <input type="checkbox"/> Swab Nasal*2 <i>Nasal Swab</i>  <input type="checkbox"/> Air Liur <i>Saliva</i>  <input type="checkbox"/> Swab Nasofaring dan Orofaring <i>Nasopharyngeal and oropharyngeal swabs</i>	<input checked="" type="checkbox"/> Tes Amplifikasi Asam Nukleat (Metode NAAT: PCR, LAMP, TMA, TRC, Smart Amp, NEAR, Next generation sequence) <i>Nucleic acid amplification test (NAAT: PCR, LAMP, TMA, TRC, Smart Amp, NEAR, Next generation sequence)</i>  <input type="checkbox"/> Tes Antigen Kuantitatif*1 <i>Quantitative antigen test (CLEIA/ECLIA)</i>	<input checked="" type="checkbox"/> Negatif <i>Negative</i>  <input type="checkbox"/> Positif <i>Positive</i> → Tolak Masuk Jepang No Entry into Japan	Date (yyyy/mm/dd)  <u>2022/ 6 / 1</u>  Time AM/PM <u>2:30</u>	

\*1 Bukan tes antigen kualitatif.

*Not a qualitative antigen test.*

\*2 Swab Nasal berlaku jika menggunakan metode tes amplifikasi asam nukleat.

*Nasal Swab is valid when the test method is Nucleic acid amplification test.*

Nama Institusi Medis *Name of Medical institution* \_\_\_\_\_